U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

1 / 1 / 2004 Through: 12 / 31 / 2004

3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Brenda S Vincent	Name Plumbers + Stemfithen Local 136 Labor Organization File Number 043 439		
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street Rt 2 Box 3>1E	street 2300 St. Joseph Industrial Park Dr.		
cay Naubstaat	ciny Evansivlle		
State (a) ZIP Code + 4 47639	State IN ZIP Code +4 47720		
5. Position in labor organization. Recording Secretary			
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):			
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name Neth-Schweizer Inc.	Christmas Party		
Trade Name, if any:	Myself + husband outlended.		
(P.O. Box, Bidg., Room No., if any 347)	7.b. Amount.		
street 405 W. Third St.			
as Mt. Vurnon	\$ 100°.		
State (N) ZIP Code + 4 47620			
signature Brende Sunant			
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)			
signed Frenche Attiont	On 7 13-105 813-7168-5991 Date Telephone Number		
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